

191—39.9 (514D,514G) Minimum standards for home health care benefits in long-term care insurance policies.

39.9(1) A long-term care insurance policy or certificate may not, if it provides benefits for home health care services, limit or exclude benefits:

- a.* By requiring that the insured/claimant would need skilled care in a nursing facility if home health care services were not provided;
- b.* By requiring that the insured/claimant first or simultaneously receive nursing or therapeutic services in a home or community setting before home health care services are covered;
- c.* By limiting eligible services to services provided by registered nurses or licensed practical nurses;
- d.* By requiring that a nurse or therapist provide services covered by the policy that can be provided by a home health aide, or other licensed or certified home care worker acting within the scope of the provider's licensure or certification;
- e.* By requiring that the insured/claimant have an acute condition before home health care services are covered;
- f.* By limiting benefits to services provided by Medicare-certified agencies or providers;
- g.* By excluding coverage for personal care services provided by a home health aide;
- h.* By requiring that the provision of home health care services be at a level of certification or licensure greater than that required by the eligible service;
- i.* By excluding coverage for adult day care services.

39.9(2) Home health care coverage may be applied to the nonhome health care benefits provided in the policy or certificate when determining maximum coverage under the terms of the policy or certificate.

This rule is intended to implement Iowa Code section 514D.9 and chapter 514G.